

The evil complained of can be remedied only by a legislative enactment, to obtain from the best sources the probable cause of death on every inquest. The efforts of the Registrar-General are already directed to this object, as part of the scheme which forms the subject of your article of the 23rd instant. The national importance of correct registration must prevail, and the whole matter be speedily reformed.

In the mean time, believing that Coroners are restrained by "the fear of the Court of Quarter Sessions," I would not censure them severely, for I have found them gentlemanly and courteous; though, indeed, I have been occasionally sent back without a fee when I have gone out of my way, in the belief that I could furnish important evidence. I blame the system rather than the men who act under its influence; but to show how that system sometimes works in relation to the interests of families, and the correctness of registration, I will select two cases from my own experience:—

A gentleman, who had been many years my patient, hung himself under circumstances that implied much previous calculation, leaving a well-written statement of the exciting causes of his sad resolution, from which alone it was scarcely possible to infer insanity. I attended the inquest as a volunteer; and perceiving the bias of the jury to a verdict of *felo de se*, and that there was no chance of my being called to give evidence, I requested the Coroner, *as a favour, waving all claim to a fee*, to allow me to read a page from my journal, written four years previously, to the effect that the deceased was then the subject of delusions. This was conceded. I proved that those delusions had never been lost, and the jury fell in with my conclusion of unsound mind; though but for my obtrusive, but timely interference, the verdict might have conveyed another shock to an afflicted family, involving, perhaps, confiscation of property.

A lady, of middle age, died suddenly, and the Coroner recorded "apoplexy." The next day her mother mentioned this to me, and as I had long known the deceased to have variable pulse, with disposition to syncope, I obtained permission to inspect the body. I found nothing to confirm the verdict; but a phrenic hernia occupied the proper situation of the heart, which was pushed out of its place towards the centre of the thorax.

I could give other illustrations of evils consequent to the absence of medical evidence. I hope the reports of such cases will find their way to the right quarter, so that the law of coroner may be amended.

I am, Sir,

Your obedient servant,

A SURGEON.

July 30, 1845.

DEATH FROM ACONITE: INQUEST.

The death of a respected member of the profession, Dr. Male, was announced in a late number of the *Provincial Journal*. In consequence of various rumours which had been circulated as to the cause of this event, an inquest was held, of which the following account, taken from the *Birmingham Advertiser* of July 31,

presents some points of interest connected with the exhibition of powerful medicines:—

The first witness, John Barker, deposed that he had lived in the service of the deceased nearly eight years, and spoke to the doctor's health up to a recent period. He was 66 years of age. On Wednesday, the 23rd, he was out, and on Thursday morning, about seven o'clock, witness took him up a cup of coffee, which he drank. He (witness) then went to the stable, and soon after deceased came down, complaining of a pain between the bowels and chest. Deceased had complained for some time past of pains in the back. He had some warm water taken up to him, and was sick two or three times. Deceased asked him if he looked unwell, and witness replied he looked very unwell. In a short time, Miss Male, his daughter, came to him, about nine o'clock. On Friday the deceased sent for him; he appeared alarmingly ill, more so than he had ever seen him before. He said he wished to bid him, (witness,) farewell, and to evince his kindness and respect towards him. He seemed to consider himself in a dying state. He did not blame any person for his illness. Witness did not know of his taking any medicine.

Mr. Russell, surgeon, of Newhall Street, was next sworn, and said, I have known the deceased for a number of years. He has complained to me occasionally, for six weeks or two months past, of pains in the back and loins. On Thursday morning, about half-past nine, his son, the Rev. Dr. Male, came for me, and on going to his father's house, I found the deceased in bed. His extremities were cold, the general surface of the skin cold and clammy, the pulse quick and feeble, (at 130,) with cramps and pains in his legs, and spasmodic pains in his stomach. He said his head was confused. He told me that, not experiencing relief, (alluding to the pains,) from medicines in ordinary use, he had been taking tincture of aconite. He then asked me if I had ever given the medicine, and I said no. I then asked him what doses he had taken, and he replied on the preceding Sunday five drops, two or three times a day. I cannot be positive whether he said twice or thrice, but I believe he said two or three times a day, and had increased it to six, eight, and ten drops. One dose of ten drops only had been taken on the previous night. He had been also suffering from diarrhoea for a few days, and he had taken a dose of ten drops of solution of opium early that morning for it. I inquired where he had got his notion from relative to the aconite. He said he had been reading a book now circulating through our societies, treating upon the advantages of aconite in similar pains. He expressed his conviction that he should die, that the medicine was too powerful for him; but he also expressed his most earnest desire that he might recover, as his life was of the utmost importance to his children at this time. This he repeated during his illness, to myself and Dr. James Johnstone. I cheered him as much as I could, reminding him of his former depression when ill, and that I thought he had nervous power sufficient to wear out the effect of the medicine he had taken. I gave him mild aperients to overcome the poison, with camphor and ammonia. His son-in-law, Mr. Amphlett, saw him along with me in the evening, and we left him somewhat, in our opinion, relieved. On Friday we again met, and towards evening with Dr. James Johnstone, as we found him more sunk. Dr. Johnstone

agreed with us in our treatment, &c. Late that evening I found him in a dying state, gradually sinking. He was in a torpid state, from which, however, he could easily be roused, and then his intellects were clear. He had no paralysis. His death took place about ten o'clock on Saturday morning. He was perfectly composed, and took an affectionate leave of myself and others, reminding me that for thirty-five years we had lived together in an uninterrupted friendship. Twenty hours after death I made a *post-mortem* examination, in the presence of Mr. Clayton, Dr. James Johnstone, Dr. Bell Fletcher, and my son. His body, with the slightest possible exception, was in a healthy state. The blood was unusually fluid. Witness described the appearances, which presented nothing remarkable, and concluded by attributing death to the accumulated doses of the aconite depressing the nervous system.

In answer to some questions put by jurors,

Mr. Russell said that such doses would not be likely to leave traces in a *post-mortem* examination beyond a fluidity in the blood. Had deceased been a younger man, in all probability he would have recovered from the shock of the medicine. Aconite is little used, and he was not prepared to say that ten drops would produce fatal effects.

The Coroner then briefly alluded to the circumstances which had induced the family to request an inquiry into the melancholy event, an event which he, in common with the medical profession generally, most sincerely deplored. The deceased was respected and honoured in life, and his loss so calamitously brought about, would be extensively and deeply felt by more than one class of society.

The jury then gave in a verdict of "Accidental death from an overdose of aconite taken medicinally by the deceased."

BRITISH MEDICINE IN SYRIA.

TO THE EDITOR OF THE PROVINCIAL MEDICAL AND SURGICAL JOURNAL.

SIR,

I am favoured with the file of the *Provincial Medical and Surgical Journal*, through my friend Dr. Hodgkin, which he says you were kind enough to supply to us at this remote quarter of the world, and for which please accept my most grateful thanks. You will be pleased to hear that my labours here have been very successful; the numbers relieved up to this date is over seven thousand, of all sects, classes, and colours. I visit the *Harems* of the most fanatical Turks and Moslems, and attend the Pasha, and all the official personages. Latterly I am consulted a good deal on the diseases of females, which, considering their natural habits of seclusion, is a great privilege, and one of the best proofs of how soon and efficiently I have overcome the prejudices of the inhabitants of one of the most fanatical cities, and the strong-hold of Moslem bigotry, in the East. The cases of insanity are now discharged cured, and the cases operated have proved successful. Our summer is set in early; thermometer at mid-day from 88° to 92°, and in the shade falling 15° and 20° at night and morning. The sickly months are July and August; sometimes the end of June and beginning of September are sickly. The country is now destroyed

by locusts, and the people always anticipate distress and disease when these make their appearance in such swarms.

With many thanks,

I am yours very truly,

JAMES B. THOMPSON, A.B., M.D.,

Chief Medical Officer.

British Hospital, Damascus,
July 9, 1845.

PROVINCIAL MEDICAL AND SURGICAL ASSOCIATION.

NOTICE OF MOTION.

The following notice of motion, to be taken into consideration at the next Anniversary, was given by Mr. Martin, at Sheffield:—

"That in future, wherever a branch of this Association is established, every candidate for admission into the Association, residing within the district of a branch, shall be received as a member through that branch. And wherever there may not be a branch of the Association, by the proposition of two members, through a member of the Council."

ROYAL COLLEGE OF SURGEONS.

Gentlemen admitted members on Monday, August 4, 1845:—J. H. Worrall; J. W. Meeson; A. Jackson; G. Browne; F. A. Kingdon; F. Hatchard; S. Ross.

Admitted Friday, August 8:—W. Wadham; F. Whitborn; J. E. Snow; H. J. G. Young; R. T. Fletcher; J. McCraith.

SOCIETY OF APOTHECARIES.

Gentlemen admitted Licentiates on Friday, Aug. 1:—H. Bencroft, Barnstaple; E. P. Downs, Stockport; A. Henry, Kingsbridge; G. W. Bagg, Colchester; G. Andrews, Manchester; G. McHenry, Liverpool.

BOOKS RECEIVED.

Remarks on Medical Reform, and on Sir James Graham's Medical Bill. By Lucius, late Censor, in a Royal College of Physicians. Second Edition. London: Whittaker and Co., 1845. 8vo. pp. 57.

TO CORRESPONDENTS.

It is requested that all letters and communications be sent to Dr. Streeten, Foregate Street, Worcester. Parcels, and books for review, may be addressed to the Editor of the *Provincial Medical and Surgical Journal*, care of Mr. Churchill, Princess Street, Soho.